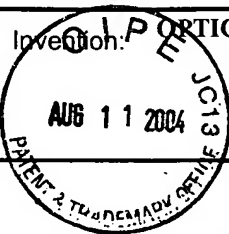
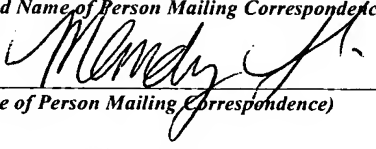


CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)			Docket No. 15436.247.40.1	
Applicant(s): Sol P. DiJaili et al.				
Application No. 10/020,558	Filing Date December 14, 2001	Examiner Nguyen, Phillip	Customer No. 022913	Group Art Unit 2828
Invention: OPTICAL LOGICAL CIRCUITS BASED ON LASING SEMICONDUCTOR OPTICAL AMPLIFIERS				
<div></div> <p>I hereby certify that the following correspondence:</p> <div>Combined Amendment and Request for Extension of Time Transmittal Letter (2 pgs., in triplicate); Amendment A and Response (26 pgs.); Copy of IDS mailed to PTO on June 25, 2002 (7 pgs.); PTO-2038 Credit Card Form in the amount of \$618.00 (1 pg.); Certificate of Mailing by Express Mail Label No. EV 510 292 973(1 pg.); and Return Receipt Postcard</div> <p style="text-align: center;"><i>(Identify type of correspondence)</i></p> <p>is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on</p> <p style="text-align: center;"><u>August 10, 2004</u> <i>(Date)</i></p> <div style="text-align: right;"><p><u>Mandy Lomeli</u> <i>(Typed or Printed Name of Person Mailing Correspondence)</i></p><p> <i>(Signature of Person Mailing Correspondence)</i></p><p><u>EV 510 292 973 US</u> <i>("Express Mail" Mailing Label Number)</i></p></div>				
<p style="text-align: center;">Note: Each paper must have its own certificate of mailing.</p>				



MDP

Date Mailed: 6-25-02

Atty/Sec: MDP/clm

Filing Date: December 14, 2001

Serial No. 10/020,558

Docket No.: 21153-05927

Applicants: Sol P. DiJaili, Jeffrey D. Walker and John M. Wachsman

Title: Optical Logical Circuits Based on Lasing Semiconductor Optical Amplifiers

Please imprint Patent Office "date stamp" hereon to indicate receipt and then return card to addressee

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| <input checked="" type="checkbox"/> Transmittal Form | <input type="checkbox"/> CPA Request Transmittal |
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| <input type="checkbox"/> Response to Notice to File Missing Parts | <input type="checkbox"/> Request to Correct Assignment |
| <input type="checkbox"/> Assignment and Recordation Cover Sheet | <input type="checkbox"/> Amendment/Response (___ pages) |
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| <input type="checkbox"/> Application Data Sheet | <input type="checkbox"/> Formal Drawings: ___ sheets |
| <input checked="" type="checkbox"/> IDS, PTO-1449, and cite references | <input type="checkbox"/> Maintenance Fee Payment |
| <input type="checkbox"/> Express Mail No. | <input type="checkbox"/> Request for Certificate of Correction |
| <input type="checkbox"/> Check in the amount of \$ _____ | <input type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Other: | |



MAR 27 2003

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PTO/SB/21 (modified)

Approved for use through xx/xx/xx, OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE


TRANSMITTAL FORM (to be used for all correspondence during pendency of filed application)	Application Number	10/020,558	
	Filing Date	December 14, 2001	
	First Named Inventor	Sol P. DiJaili	
	Group Art Unit Number	2811	
	Examiner Name	Not yet known	
Total Number of Pages in This Submission	7*	Attorney Docket Number	21153-05927

ENCLOSURES (check all that apply)

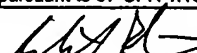
<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed	<input type="checkbox"/> Issue Fee Transmittal
<input checked="" type="checkbox"/> Return Receipt Postcard	<input type="checkbox"/> Letter to Chief Draftsperson
<input type="checkbox"/> Response to Notice to File Missing Parts	<input type="checkbox"/> Formal Drawing(s): [] Sheet(s) of Figure(s) []
<input type="checkbox"/> Assignment & Recordation Cover Sheet	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Declaration	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Power of Attorney	<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Application Data Sheet	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Information Disclosure Statement & PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Cited References	<input type="checkbox"/>
<input type="checkbox"/> Request for Corrected Filing Receipt	<input type="checkbox"/>
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<input type="checkbox"/> Revocation and Substitute Power of Attorney	<input type="checkbox"/>

REMARKS: *Number of pages does not include cited references

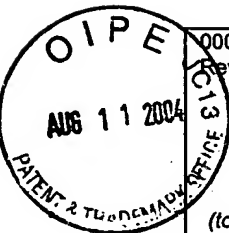
SIGNATURE OF ATTORNEY OR AGENT

Signature:			
Attorney/Reg. No.:	Michael D. Plimier, Reg. No.: 43,004	Dated:	June 25, 2002

CERTIFICATE OF MAILING

I hereby certify that this correspondence, including the enclosures identified above, is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on the date shown below. If the Express Mail Mailing Number is filled in below, then this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service pursuant to 37 CFR 1.10.			
Signature:			
Typed or Printed Name:	Michael D. Plimier	Dated:	June 25, 2002
Express Mail Mailing Number (optional):			

21153/05927/DOCS/1263428.1



Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

000278 (modified)
Rev. 10/2001U.S. Department of Commerce
Patent and Trademark Office

Complete If Known

Application Number	10/020,558
Filing Date	December 14, 2001
First Named Inventor	Sol P. DiJaili
Group Art Unit	2811
Examiner Name	Not yet known
Attorney Docket Number	21153-05927

FEE TRANSMITTAL

TOTAL AMOUNT OF PAYMENT

Subtotal (1) + Subtotal (2) + Subtotal (3) = (\$ 0.00)

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to:

- ☐ Charge the indicated fees to the below mentioned deposit account.
- ☒ Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. †
- ☐ Applicant claims small entity status
See 37 CFR 1.27

Deposit Account Number: 19-2555

Deposit Account Name: FENWICK & WEST LLP

A Duplicate Copy of this authorization is attached

2. ☐ Payment Enclosed:☐ Check ☐ Credit Card ☐ Other

FEE CALCULATION (fees effective 10/01/2001)

1. FILING FEE

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
101/\$740	201/\$370	Utility Filing	
106/\$330	206/\$165	Design Filing	
108/\$740	208/\$370	Reissue	
114/\$160	214/\$80	Provisional Filing	
SUBTOTAL (1)			(\$ 0.00)

2. CLAIMS

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description
103/\$18	203/\$9	Claims in excess of 20
102/\$84	202/\$42	Independent claims in excess of 3
104/\$280	204/\$140	Multiple dependent claim
109/\$84	209/\$42	Reissue independent claims over original patent
110/\$18	210/\$9	Reissue claims in excess of 20 and over original patent

3. ADDITIONAL FEES

Large Entity Fee Code/Fee	Small Entity Fee Code/Fee	Fee Description	Fee Due
105/\$130	205/\$65	Surcharge - late filing fee or oath	
127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet	
147/\$2,520	147/\$2,520	For filing a request for reexamination	
115/\$110	215/\$55	Extension for response within first month†	
116/\$400	216/\$200	Extension for response within second month†	
117/\$920	217/\$460	Extension for response within third month†	
118/\$1,440	218/\$720	Extension for response within fourth month†	
128/\$1,960	228/\$980	Extension for response within fifth month†	
119/\$320	219/\$160	Notice of Appeal	
141/\$1,280	241/\$640	Petition to revive unintentionally abandoned application	
142/\$1,280	242/\$640	Utility Issue Fee (Or Reissue)	
143/\$460	243/\$230	Design Issue Fee	
122/\$130	122/\$130	Petitions to the Commissioner	
126/\$180	126/\$180	Submission of Information Disclosure Statement	
179/\$740	279/\$370	Request for Continued Examination (RCE)	
581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)	
146/\$740	246/\$370	Filing a submission after final rejection (37 CFR 1.129(a))	
149/\$740	249/\$370	For each additional invention to be examined (37 CFR 1.129(b))	
Other fee (specify):			
Other fee (specify):			
SUBTOTAL (3)			(\$ 0.00)

(Col. 1)		(Col. 2)		(Col. 3)		Fee	Fee Due
For	No. of Existing Claims	minus*	Highest No. Previously Paid For	=	Extra**		
TOTAL		minus*	20 or 0	=		x	
INDEP		minus*	3 or 0	=		x	
[] First presentation of multiple dependent claim							

* Subtract the greater number of Col. 2

** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3

SUBTOTAL (2) (\$ 0.00)

SUBMITTED BY

Typed or Printed Name Michael D. Plimler

Signature

Complete (If applicable)

Reg. Number 43,004

Date

June 25, 2002

21153/05927/DOCS/1263429.1